



## ASSIGNMENT/UNASSIGNMENT OF ADMINISTRATOR/MASTER CERTIFICATE

Enclose a check or money order payable to: Department of Labor and Industries  
Note: Only one fee is required if you are assigning and unassigning at the same time.

**Assignment/Unassignment Fee: \$35.00**

<b>Name</b> <i>(Last name, first name, middle initial)</i>			<b>Date</b>
<b>Mailing Address</b>			<b>Certificate Number</b>
<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>Daytime Phone</b> <i>(Include area code)</i>
Join the electrical listserv for email updates & notices at <a href="http://listserv.wa.gov/archives/electrical.html">http://listserv.wa.gov/archives/electrical.html</a> or by providing your email address here:			

**PLEASE REVISE MY STATUS AS SHOWN BELOW (Use both blocks if necessary)**

<b>AS OF</b>				<b>I WILL BE ASSIGNED TO</b>
	<i>Month</i>	<i>Day</i>	<i>Year</i>	
<b>Electrical/Telecommunications Contractor Name</b>				<b>Contractor License Number</b>
<b>City</b>		<b>State</b>	<b>Zip Code</b>	
<b>I AGREE TO PERFORM THE DUTIES OF THE ADMINISTRATOR/MASTER AS STATED IN CHAPTER 19.28 RCW AND TO NOTIFY THE DEPARTMENT WITHIN 10 DAYS OF A CHANGE IN MY ASSIGNMENT STATUS AS AN ADMINISTRATOR/MASTER.</b>				
<b>Date</b>		<b>Administrator's Signature</b>		

**ADMINISTRATOR/MASTER'S SIGNATURE MUST BE NOTARIZED**

<b>AS OF</b>				<b>I WILL BE UNASSIGNED FROM</b>
	<i>Month</i>	<i>Day</i>	<i>Year</i>	
<b>Electrical/Telecommunications Contractor Name</b>				<b>Contractor License Number</b>
<b>City</b>		<b>State</b>	<b>Zip Code</b>	
<b>I CONFIRM THAT I AM NO LONGER PERFORMING THE DUTIES OF THE ADMINISTRATOR/MASTER AS STATED IN CHAPTER 19.28 RCW AND AM NOTIFYING THE DEPARTMENT WITHIN 10 DAYS OF A CHANGE IN MY ASSIGNMENT STATUS AS AN ADMINISTRATOR/MASTER.</b>				
<b>Date</b>		<b>Administrator's Signature</b>		

**ADMINISTRATOR/MASTER'S SIGNATURE MUST BE NOTARIZED**

NOTARY  
SEAL

SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE	MY COMMISSION EXPIRES ON
NOTARY PUBLIC IN AND FOR THE STATE OF	RESIDING AT

NOTARY SIGNATURE

**ASSIGNMENT CONFIRMATION** (Confirmation only needs to be completed if applicant is assigning.)

<b>I am the owner, partner, principal, or an officer of the contractor above. I confirm the above applicant is to be assigned as the designated administrator/master for this contractor's license to perform the administrator/master's duties per chapter 19.28 RCW.</b> (NOTARY NOT REQUIRED FOR COMPANY REPRESENTATIVE SIGNATURE)		
<b>Date</b>	<b>Company Representative's Name (Print)</b>	<b>Company Representative's Signature</b>

☐ Assignment

☐ Separation

Reason Code

Separation Date

Initials